



S U M M E R 2 0 0 6

# Veterans' Health<sup>®</sup>

VA Capitol  
Health Care  
Network  
VISN 5  
FIVE STAR SERVICE FOR THOSE WHO SERVED



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# Quality health care for polytrauma



James J. Nocks,  
M.D., M.S.H.A.

**P**olytrauma is trauma to several body areas or organ systems. We are committed to providing high-quality care and managing the lifelong needs of active-duty members and veterans who suffer from polytrauma. To accomplish this, VISN 5 has created a polytrauma team with members of various disciplines and specialties to provide care as close to home as possible.

Our polytrauma team provides specialized services including:

- outpatient care for traumatic brain injuries, orthopedic injuries, wounds, pain, visual and auditory impairments, post-traumatic stress disorder and dental injuries
- inpatient rehabilitation services
- ongoing case management and follow-up services

Patients first receive a comprehensive medical evaluation that includes a self-reported medical history and current complaints, followed by a comprehensive medical exam. Based on their findings, the polytrauma team will recommend appropriate treatment and referrals to specialists in brain injury evaluation and treatment, amputation management and prosthetics, hearing impairment or emotional adjustment/stress management. The polytrauma team commonly identifies previously unrecognized injuries or impairments that may cause ongoing problems. We are dedicated to making your transition as smooth as possible and have case managers available to assist you at all stages of your care. For more information about the VISN 5 Polytrauma Program, please contact Heather Malecki, DPT, at **(202) 745-8643** or Jean Langbein, LCSW, at **(202) 745-7212**.

Thank you,

A handwritten signature in black ink, appearing to read "James J. Nocks, M.D.".

James J. Nocks, M.D., M.S.H.A., Network Director  
VA Capitol Health Care Network, VISN 5



# Get My HealtheVet!

## Your online gateway to veteran health and wellness

**M**y HealtheVet, online at [www.myhealth.va.gov](http://www.myhealth.va.gov), is the gateway to veteran health benefits and services. It provides access to trusted health information, links to federal and VA benefits and resources, the Personal Health Journal and now online VA prescription refill. In the future, My HealtheVet registrants will be able to view appointments, copay balances, key portions of their VA medical records and much more! My HealtheVet is a powerful tool to help you better understand and manage your health.

### Coming soon to My HealtheVet

Many great features are planned for 2006:

- Graphs will be added to journals to make it easier to visualize your health measurements.

- Rx Refill will be upgraded to include names of medications.
- Veteran patients will be able to request key portions of their VA health record (such as laboratory work, medications, discharge summaries and patient reminders).
- Veterans will be able to view appointments and copay balances online.
- Veterans will be able to give access to some or all of their health information to others, including doctors, family members and veteran advocates.

In the works are other interesting features like secure doctor/patient messaging, moderated discussions on the web and web-based training/education programs.

### Personal Health Journal

The Personal Health Journal provides all these valuable fea-

tures for managing and tracking your personal health information:

- **Personal Information:** Helps you keep track of your:

- ☐ contact information
- ☐ emergency contacts
- ☐ health care providers
- ☐ treatment locations
- ☐ health insurance information

- **Wallet ID Card:** Print your personal information on a handy, preformatted wallet card for convenient reference. It also has open spaces for you to list allergies and other critical medical conditions.

- **Military Health History:** Record important events from your military service, exposures you think you may have experienced and assignments related to your health history.

- **Medications, over-the-counter drugs, herbals and supplements:** Record the name, starting and ending date, prescription number and dosage.

- **Allergies:** Keep track of your allergies by date, severity, reaction, diagnosis and comments.

- **Tests:** Keep track of your tests by test name, date of test, location where test was performed, provider's name, results and any comments.

- **Medical Events:** Keep track of illnesses, accidents or other events by logging their date, treatment prescribed or comments regarding the event.

- **Immunizations:** Record the immunization, date received, method used and any reactions you might have.

- **Health eLogs:** Track your readings for these health aspects:

- ☐ blood pressure
- ☐ blood sugar
- ☐ cholesterol
- ☐ body temperature
- ☐ body weight
- ☐ heart rate
- ☐ pain ★







## Recognizing and Appreciating VSOs

Every day, the Stars and Stripes proudly waves on the flagpole that dominates the front drive of the Washington DC VA Medical Center (DCVAMC) with the POW/MIA flag accompanying it. Now, a Veterans Service Organization (VSO) flag will join them.

VSOs have long played an important role at DCVAMC, and our Director, Sanford M. Garfunkel, frequently comments that we couldn't get along without them. From the generous cash and in-kind donations the facility receives each year to the devoted volunteers delivering newspapers and warm wishes to patients each morning, VSOs and their auxiliaries are ever-present reminders of the selflessness of veterans in support of their comrades-in-arms.

The VSO Recognition and Appreciation Program gives the medical center a chance to demonstrate it appreciates the many

good works of VSOs and to recognize a different VSO each quarter. Through the program, VSOs are introduced to employees, patients and visitors.

During the honorary period, DCVAMC raises the featured VSO's flag, tells its story in medical center newsletters, invites its chapters to participate in hospital-wide events, encourages members to provide information about the organization's history and current activities and puts the VSO center stage. The VSO may bring memorabilia and items of historic significance to the medical center for display or sponsor a program or an activity for patients.

The first VSO honored was the Military Order of the Purple Heart (MOPH). The MOPH was founded in 1932 to serve our nation's war wounded and disabled and chartered by Congress in 1958. At a touching ceremony on March 7, representatives from the national and local levels of MOPH shared the podium with

Mr. Garfunkel. As their flag was raised, Bill Pittman, President of MOPH Chapter 1964, explained that the Purple Heart is the oldest medal in the world still in continual use. It was created in 1782 at Valley Forge by our nation's first president, General George Washington, as the Badge of Military Merit.

DCVAMC's VSO Recognition and Appreciation Program is a great way to strengthen the medical center-VSO partnership. We believe the program helps DCVAMC meet the needs of the veterans we serve. For more information, contact Michelle Spivak at (202) 745-4037. ★



Pictured at left and above: Members of the Military Order of the Purple Heart and Auxiliary join veterans and friends from the DCVAMC at the first VSO Recognition and Appreciation Program ceremony on March 7, 2006.

# Improving DCVAMC's service quality

## Better customer service means better care

**P**roviding excellent customer service is a priority for VA and the Washington DC VA Medical Center (DCVAMC). DCVAMC is doing an outstanding job in internal (employee to employee) and external (employee to veteran) customer service, but there's always room for improvement. To ensure patient satisfaction, DCVAMC has started a comprehensive customer-service training program. Every member of the staff—from the Medical Center Director to Business Office, Nutrition and Food Service, Nursing Service and Facility Management employees, will be trained.

Providing excellent health care is our first goal, but providing health care with compassion is almost as important. The way we serve influences veterans' perception of how well we're doing our jobs. Good customer service skills are also important because our "customers" aren't only veterans, but colleagues as well.

Isn't customer service just common sense? Well, yes and no. Everyone knows the importance of being polite, but not everyone knows how to be a good listener, how to ask ques-

tions that get to the heart of an issue or concern or how to clearly give instructions and ensure they're understood. These are just a few of the topics addressed in the DCVAMC customer service curriculum.

The daylong class offers basic concepts, skills and tools to enhance customer service outcomes with internal and external customers. Goals of the customer service program include:

- improving patient satisfaction
- providing employees with methods to hold staff accountable
- improving internal service quality and employee satisfaction

- building teamwork
- enhancing problem-solving skills at all levels
- providing supportive coaching strategies
- learning ways to recognize and reward outstanding employees
- reinforcing VA health care values of trust, respect, excellence, compassion and commitment

Veterans rate VA among the best health care providers in the nation. To continue receiving that admirable ranking, DCVAMC is making this investment in customer service training to improve your health care experience. ★



# It's not your father's VA

by Art Pine

If you were to imagine how poorly run government medical care could be, chances are the first picture that would come to mind would be a VA hospital. For much of the post-Vietnam War era, the popular perception of VA facilities has been one of dilapidated, often-filthy buildings; uncaring medical staff; chronic shortages; and neglected patients.

One of the best-kept secrets in health care is that the Veterans Health Administration, as the VA's medical arm is now known, has overhauled its health care delivery system over the past 12 years, transforming it into a responsive, high-quality

medical care network that is praised by experts and should be emulated by private hospitals and clinics.

"Today, the VA's both the largest and the best-integrated health care system in America and maybe in the world," said R. James Nicholson, VA's Secretary. Jonathan B. Perlin, M.D., VA's Under Secretary of Health and VHA's head, said, "We're not your father's VA. It was clear we needed to change or we'd become obsolete."

## Turning the system around

What VA did in 1994 was the medical equivalent of calling in the Marines—it hired Kenneth

W. Kizer, M.D., a no-nonsense former Navy medical officer with broad experience in running public and private health care operations. Dr. Kizer implemented changes that included reorganizing the disjointed hospital system by setting up 22 regional networks where hospitals worked together within each region. He set up hundreds of local outpatient clinics where veterans would go first to see primary care physicians instead of having to drive long distances for basic medical care. Dr. Kizer also established high performance standards for a wide array of services from blood pressure monitoring to treating heart-attack victims and created a system to monitor how well these standards were being met.

With James P. Bagian, M.D., a physician and former NASA astronaut who had run the Challenger explosion investigation, Dr. Kizer set up a patient-safety program to reduce medical errors. Mistakes or close calls within VA are immediately reported and analyzed. Doctors and nurses fix systemic problems and devise procedures to prevent those problems from happening again. Dr. Bagian's National VA Center for Patient Safety in Ann Arbor, Mich., collects patient-safety information and provides encouragement and advice. The center has become a resource





not only for VA, but the entire nation as well.

### Cost-effective care

By the time these changes fully took effect in the late 1990s, VA had vastly improved medical care, significantly cut patient waiting times and dramatically reduced errors. And VA has saved money in the process. While VA's overall medical budget doubled to \$30.7 billion between fiscal year 1993 and fiscal year 2006, the number of patients it's treating has soared from 2.8 million to 5.4 million, with a staff that's 5 percent smaller now than in 1993. After adjusting for inflation, the average cost of treating each patient went from \$5,691 in 1995 to \$3,983 in 2002. The cost was \$4,281 in 2005, still below the 1995 figure.

### Cutting-edge record-keeping

VA also shifted to a completely electronic recordkeeping system that catapulted it ahead of most private hospitals in quality and management. Converting all of VA's records to electronic format enables physicians to improve their monitoring of patients' health status and active medical problems, symptoms and treatment; keep track of appointments and lab tests; and avoid prescribing drugs that shouldn't be taken together by automatical-

ly checking new prescriptions against the drugs a patient is already taking. With the click of a mouse, a doctor can call up graphs showing temperature, heart rate and other vital signs and electrocardiograms, X-rays and magnetic resonance images (MRI).

Through My HealtheVet, patients can call up their own medical records online as well. By logging onto a website, veterans can view test results, X-rays, MRIs and prescriptions. They can also enter data when they take their own temperature or blood pressure at home or write in new symptoms when they start to feel badly.

Having all records and prescriptions in electronic form eliminates the delays, handwriting problems and vulnerability to loss that often comes with paper records. About 62,000 patients' records in New Orleans were saved after hurricane Katrina last year even though the city was heavily damaged, because the files were preserved on VA's electronic system.

### The customers approve

The improvement hasn't been lost on VA's customers—the patients it serves. In a survey completed in January 2006 by the National Quality Research Center at the University of Michigan, veterans who went to VA facilities for treatment gave the VA a rating of 83 out of 100 for its inpatient care and 80 for outpatient care. By comparison, a similar survey of patients receiving care from private-sector facilities showed ratings of 73 for inpatient care and 75 for outpatient care. ★



## A big fan of VA

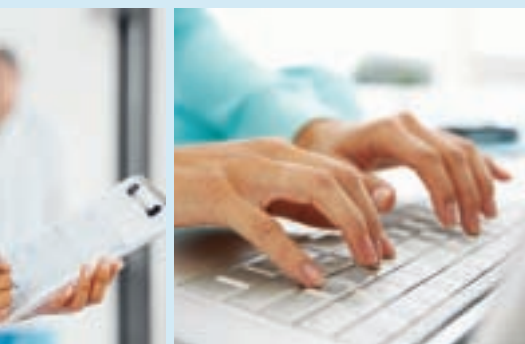
**F**ormer Marine Staff Sergeant James McKee remembers the bad old days in VA.

Mr. McKee's first encounter with VA medical care in 1971 was unnervingly brief. Discharged after returning from Vietnam, he walked into a VA hospital in New York, looked around in horror and headed right out the door again.

"It was pretty hectic," Mr. McKee said, still shaking his head over what he found then. "The hospital was filthy. There were people shooting up [drugs] in the telephone booths. The place looked like it would do more harm than good. I didn't even wait to see a doctor. I just walked out."

Today, Mr. McKee, a 59-year-old retiree living in rural Rowe, Mass., is one of VA's biggest fans. His primary care physician—only 30 minutes away in a nearby VA outpatient clinic—is "phenomenal," he said, and the agency has a program for post-traumatic stress disorder "that ought to be emulated." Waiting time is minimal, doctors and nurses are "very conscientious," and the medical care is first-rate—"comparable to the outside," Mr. McKee said.

"It's been a huge improvement," he added.





## Stay in the loop: Get E-News!

**T**he VA Maryland Health Care System wants to keep you in the know through our E-News subscription service. With this free service, you get immediate updates about VA health and benefits information.

Once you've enrolled, you'll receive e-mail messages from us about important health care issues, changes in VA eligibility, new programs and services, spe-

cial events, educational programs and changes in clinic hours and schedules.

E-News will also include the latest changes and happenings throughout VA and the VA Maryland Health Care System. Your e-mail information will be kept private and will not be made available to other federal agencies or outside organizations. You can also unsubscribe to E-News at any time.

If you don't have an e-mail address, consider having a family member or friend enroll and ask him or her to share the information with you. ★

### Enroll now!

**T**o enroll in the E-News service, go to our website at [www.vamhcs.med.va.gov](http://www.vamhcs.med.va.gov) and click on VAMHCS E-News or send your first name, middle initial, last name and e-mail address to:

**Public & Community Relations (135)**  
**Baltimore VAMC**  
**10 N. Greene St.**  
**Baltimore, MD 21201**

## A robot that helps you walk

### Anklebot aids paralyzed legs

**R**obots are used for just about everything imaginable these days, from assembling cars to motorizing wheelchairs. Now with the invention of the Anklebot, they may be able to help patients with paralysis walk. Stroke survivors with paralysis who participate in research studies at the Baltimore VA Medical Center (VAMC) will discover whether Anklebot can improve walking. The Anklebot, developed by researchers at the Massachusetts Institute of Technology (MIT), marks a significant advancement in robotics that help "teach" paralyzed legs to move more effectively.

Already in operation at the

Baltimore VAMC is the MIT-Manus robot, proven in clinical trials to help stroke patients regain arm movement. During therapy using MIT-Manus, a patient sits at a table with the lower arm in a brace attached to the robot's arm. A video screen prompts the patient to perform arm exercises such as connecting a series of dots or drawing hands on a clock. If movement doesn't occur, the robot is programmed to move the patient's arm. If the patient initiates movement, the robot provides adjustable levels of guidance and assistance.



Just like the MIT-Manus, Anklebot is a "movement computer" that can be programmed in the same way but targets the paralyzed ankle. After repeated treatment, researchers expect improved balance and walking function.

For more information about this research study, call (410) 605-7000, ext. 5413. ★



## Getting physical

### Perry Point's finest get latest in physical therapy

**E**veryone loves the feeling of a new home, and geriatric and long-term care employees at the Perry Point VA Medical Center are no exception. The physical therapy (PT) section recently moved into a newly remodeled space to better serve the rehabilitation needs of patients. The new state-of-the-art 2,500-square-foot clinic is large enough for both occupational therapy (OT) and PT, combining these services for the first time at Perry Point.

Jennifer Coy, Occupational Therapist, is impressed with the new and modern clinic. "The new space now allows us to accommodate all of OT's splinting and patient training needs, which is very helpful," said Coy. "We also added a model kitchen we use for training veterans where they can transfer their skills and use their kitchen at home safely," added Coy.

Tina Mathias, Physical Therapist, is confident that the new clinic will improve patient care. "The new space renovated for us in Building 23 has many new windows

with a view of the Susquehanna River, total climate control and twice the space of our previous clinic," said Mathias. With the combined units, OT can glance over at PT to see what a particular patient is doing and then alter their therapy to work toward the same goal.

Some of the other amenities include new laptop computers on rolling carts. These laptops allow therapists to move with the patient from each piece of exercise equipment while docu-

menting their progress. "Veteran and staff morale has increased greatly since we moved into this new clinic," commented Mathias. "Patients are eager to progress because the new environment is conducive to healing," she added.

The new physical/occupational therapy expansion is just another example of how the VA Maryland Health Care System is "Working Together for a Healthier Veterans' Community." ★



The PT/OT group proudly shows off their new space. Pictured from left in the back row are Lois Slack, OT; Tina Mathias, PT; Patricia Keigler, PT Assistant; Peter Glover, PT; Megan Owens, former OT student; and Mark Heuser, M.D., Director, Geriatrics & Long-Term Care Clinical Center. Pictured from left in the front row are Jennifer Coy, OT; Alexa Schenk, PT Assistant; and John Spriggs, PT Assistant.

## Meet our first geriatric fellow

**E**tosha Dixon, M.D., is the Martinsburg VA Medical Center's (VAMC's) first geriatric medicine fellow. She started the year-long fellowship program in October 2005. Dr. Dixon, a well-qualified, dedicated physician, is admired and recognized by her patients, their families and staff. She's shown great compassion and outstanding interpersonal skills while caring for our nursing home patients

and in particular the dying veterans in the Palliative Care Unit.

Dr. Dixon graduated in 2001 from the University of Maryland School of Medicine in Baltimore and in 2004 completed a Christiana Care Family Practice Residency in Wilmington, De. She developed her expertise in home care as a House Call Physician in the Baltimore area.

At the Martinsburg VAMC,

her training rotations are in Nursing Home, Palliative Care, Dementia Care, Rehabilitation and Pain Management, Wound Care, Geriatric Psychiatry, Neurology and Urology. She's a frequent presenter at the Martinsburg VAMC's monthly Geriatric Journal Club series, the weekly Board Review Question Series and the monthly Geriatric Case Presentations. Dr. Dixon has assumed a teaching role for medical students, interns and residents of the West Virginia University's Rural Family Medicine Program with lectures on topics such as skin ulcerations.

Dr. Dixon was a contributing author and lectured at the 2nd Annual Advanced Geriatrics Educator Skills (AGES) Conference in Morgantown, W.V., in February. AGES is a certification program developed by Geriatric Educators of the Medical Schools of West Virginia (GEMS). ★

**Dr. Dixon, a well-qualified, dedicated physician, is admired and recognized by her patients, their families and staff.**

Etosha Dixon, M.D., is the first geriatric medicine fellow at Geriatric/Long-Term Care (G/LTC) Service at the Martinsburg VAMC.



Pictured from left are Elisabeth Sethi, M.D., Chief, G/LTC Service; and Etosha Dixon, M.D., Geriatric Fellow, G/LTC Service, with a patient.



Pictured from left are Jianming Xie, M.D., Medical Director, Nursing Home Care Unit and Palliative Care Unit, G/LTC Service; Etosha Dixon, M.D., Geriatric Fellow, G/LTC Service; and Elisabeth Sethi, M.D., Chief, G/LTC Service.

## Committed to quality geriatric care

**The state's first geriatric medicine fellowship—at Martinsburg VAMC**

**T**he Martinsburg VA Medical Center (VAMC) is proud to offer West Virginia's first geriatric medicine fellowship in collaboration with West Virginia University's (WVU's) Geriatric Medicine Residency Program. West Virginia lagged behind the rest of the country in training physicians to care for its elderly citizens, even though in 1999 the state had the oldest mean population over 50, 55 and 60 years old in the United States. Until 2005, when the Accreditation Council for Graduate Medical Education approved the WVU Geriatric Program, West Virginia had no Geriatric Fellowship or residency training programs in any of its medical schools or community teaching hospitals. Only 63 West Virginia physicians had the American Board of Family Practice or the American Board of Internal Medicine's Certificate of Added Qualifications in Geriatrics—which meant there was only one geriatrician for every 4,399 people 65-years old and older. In contrast, Pennsylvania has eight Geriatric Fellowship/Residency Programs and one geriatrician for every 2,699 people

65-years old and older.

The new WVU Geriatric Medicine Residency Program educates specialists in the interdisciplinary delivery of health care to the elderly. Geriatricians provide care in hospital, nursing home, hospice, clinic and home care settings. Memory loss, arthritis, end-of-life care, acute and chronic illness management, frailty and disability prevention, and complex multiple-medication regimen supervision to ensure patient safety are several areas of expertise developed by geriatricians. Geriatricians are also needed to develop teaching skills for instructing future health care workers. The WVU Center on Aging will collaborate with the Geriatric Medicine residents and faculty in the areas of research and teaching. ★



Geriatric/Long-Term Care Service staff members, first row from left, are Maksed Choudry, M.D., Staff Physician; Jianming Xie, M.D., Medical Director, Nursing Home Care Unit and Palliative Care Unit; Etosha Dixon, M.D., Geriatric Fellow; Florecita Palomo, M.D., Staff Physician; Elisabeth Sethi, M.D., Chief; and Debbie Sweatt, Program Assistant. In the back row from left, are Anteneh Cheno Habte, M.D., Medical Director, NHCUB; John Woynicz, Administrative Assistant, Chief; Jeff Hartley, R.P., Pharmacy Service; Rickie White, PA-C, Nursing Home and Palliative Care Unit; Bruce Corsino, Ph.D.; and Richard Corbin, R.P., Pharmacy Service.

## Geriatric Medicine Fellowship FOUNDERS

**G**uiding the geriatric medicine fellowship through its planning stages were the Martinsburg VAMC's Linda J. Morris, M.D., Chief of Staff and Geriatric Service Line Managers. The Martinsburg VAMC team worked with staff from the West Virginia University Robert C. Byrd Health Sciences Center (WVUHSC)-Eastern Division and the WVU Center on Aging. Finalizing the program were Konrad Nau, M.D., Associate Dean of WVUHSC-Eastern Division and Chair of the Department of Family Medical-Eastern Division; Jianming Xie, M.D., the Martinsburg VAMC's Medical Director of the Nursing Home Care Unit and Palliative Care Unit; and Elisabeth Sethi, M.D., Martinsburg's Chief of Geriatrics.





# VA Capitol Health Care Network Veterans Integrated Service Network 5 (VISN 5)

## Important Telephone Numbers

### VA Maryland Health Care System

**Baltimore VAMC**

1-800-463-6295

**VAMHCS Medical Advice Line**

1-800-865-2441

**Perry Point VAMC**

1-800-949-1003

**Automated Prescription Refill and  
Clinic Appointment System**

1-800-463-6295, ext. 7395

**Baltimore VA Rehabilitation  
& Extended Care Center**

1-800-463-6295

### Martinsburg VA Medical Center

**Martinsburg VAMC**

(304) 263-0811

**Medical Advice Line**

1-800-817-3807 or (304) 262-4855

**Patient Eligibility**

(304) 263-0811, ext. 3758/3757  
Monday–Friday, 8 a.m.–4:30 p.m.  
or ext. 3050 after 4:30 p.m.

**Automated Prescription Refill System**

(304) 263-0811, ext. 4870 (all hours)

**Outreach Coordinator**

(301) 665-1462

### Washington DC VA Medical Center

**General Information**

(202) 745-8000

**Patient Service Center**

(202) 745-8247

**VETS Information**

(202) 745-4046

**PTSD Clinic Number**

(202) 745-8591

### Outpatient Clinics

**Cambridge, MD**

(410) 228-6243

**Charlotte Hall, MD**

(301) 884-7102

**Cumberland, MD**

(301) 724-0061

**Fort Howard, MD**

(410) 477-1800

**Glen Burnie, MD**

(410) 590-4140

**Greenbelt, MD**

(301) 345-2463

**Hagerstown, MD**

(301) 665-1462

**Loch Raven, MD**

(410) 605-7650

**Pocomoke City, MD**

(410) 957-6718

**Alexandria, VA**

(703) 719-6797

**Harrisonburg, VA**

(540) 442-1773

**Stephens City, VA**

(540) 869-0600

**Franklin, WV**

(304) 358-2355

**Petersburg, WV**

(304) 257-5817

**Washington, DC**

(202) 745-8685

### Vet Centers

**Baltimore, MD**

(410) 764-9400

**Cambridge, MD**

(410) 228-6305, ext. 4123

**Elkton, MD**

(410) 392-4485

**Silver Spring, MD**

(301) 589-1073

**Washington, DC**

(202) 543-8821

**Martinsburg, WV**

(304) 263-6776

**Alexandria, VA**

(703) 360-8633

### Veterans Benefit Administration

**1-800-827-1000**

### Education Information Hotline

**1-800-442-4551**

**Visit us on our website at [www.va.gov/visn5](http://www.va.gov/visn5)**

### Veterans' Health

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